PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

B-4436 61965-1

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Column 2)		1	TYPE		OR	SMALL	
TOTAL CLAINS			52					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			32 minus 20=		*15-			X\$ 9=		OR	X\$18=	216
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=	84
MU	LTIPLE DEPEN	IDENT CLAIM PE	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	lèss than ze	iro, entei	"0" in c	olumn 2	ı	TOTAL		OR	TOTAL	10 LO
£.	INK C	LAIMS AS A	MENDED	- PAR	T 11		. 1			•	OTHER	
b	116	(Column 1)		(Colur	nn 2) (Column 3)		<u> </u>	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 2	Minus	**	30	=]	X\$ 9=		OR	X\$18=	
	Independent	AUTATION OF M	Minus	***	4	<u> </u>	↓	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=.		OR	+280=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colur	mn 2)	(Column 3)		ADDIT. FEE]	ADDIT. FEE	
_		CLAIMS		HIGH	EST -	(Coldinary)	1	1	ADDI-		·	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**	· · · · · · · · · · · · · · · · · · ·	•	▋┃	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAIM		$\ \ $	X42=		OR	X84=	•
	rinoi Frese	INTATION OF MC	LIPLE DEF	ENDEN	CLAIM		」 [+140=		OR	+280=	
TO										OR	TOTAL	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
ပ		CLAIMS		HIGH	EST		T		ADDI-	ı		ADDI-
AMENDMENT (REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= ·	1 f	X42=			V04	
۷	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM]	A42=		OR	X84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR ,	TOTAL ADDIT. FEE	
		mber Previously Pai					er fou	nd in the app	•	in col	umn 1.	